

### **STATE ETHICS COMMISSION**

## 2021 STATEMENT OF ECONOMIC INTEREST

### **ELECTRONIC FILING**

# This entire form must be completed to fulfill your ethics filing obligation.

Filer's Na	ame (First, Middle, Last	t)			'			
Prefix	First Name	Middle Name		Last Name			Suffix	
	Adrian			Phillips				
Current I	Employer			Job Title				
North Ca	rolina Industrial Comm	nission		Deputy Com	missioner			
Nature o	r Type of Business							
Administration of Workers' Compensation Act								
Reason For Filing (Complete all that apply.)								
State Go	vernment Job (Specify	agency and position	on.)	Board/Commission (List complete names of all State boards on which you are serving or are being considered.)				
				Industrial Co	ommission			
Judicial (	Officer (Specify office.)			Legislator (S	pecify House or Senate.)			
A. Do o	A. Do other immediate family members reside in your household?							
☐ Yes         No								
On this form, "immediate family" includes your spouse (unless legally separated). It also includes members of your extended family (your and your spouse's children, grandchildren, parents, grandparents, and siblings, and the spouses of each of those persons) who reside in your household.								
	full name of <b>all adults</b> ated by marriage, enlis				hold. Minors are childrer or emancipation.	under 18. Tl	hey are	
	mes of Adults and ncipated Minors	Relationship	En	nployer	Job Title	Nature of E	Business	

B. List only the initia		·	·				child ι	under 18 years old.
Initials of Unemancipated Minors	Relationship Employer Job Title Nature of Business							
Property Interests	5							
<ol> <li>As of December 3</li> <li>A. have an owner \$10,000 or mo</li> <li></li></ol>	ship interest i	•	•		•	idence) wil	th a m	narket value of
Owner of Real E	state	% Owner	ship Interest	Loca	tion by C	City	Lo	cation by County
Adrian Phillips (Self)	10	00.00%		Mebane		,	Alama	ince
<ul><li>B. lease or rent real estate or personal property to or from the State of North Carolina with a market value of \$10,000 or more?</li><li>☐ Yes ☒ No</li></ul>								
Name of Less	sor		of Lessee enter)		Estate, Lo		If	Personal Property, Describe
2. At any time during North Carolina pe					nmediate	family sell	to or	buy from the State of
Name of Pu	rchaser		Name of	Seller			Туре	of Property

Financial Interests				
3. As of December 31, 2020, did you interests valued at \$10,000 or mo			amily own any of the following financial	
A. Stock in a publicly owned comp	pany?			
☐ Yes	·			
▶ Do <u>not</u> list interests in a widely held pension or deferred compensation pla 1. the fund is publicly traded or its 2. neither you nor an immediate far	ins) if: assets are widely div	ersified; and	ds, regulated investment companies, or	
Owner of Interest		Full Name	of Company or ticker symbol	
B. Stock options in a company or bu	ısiness?			
☐ Yes         No				
Owner of Stock Option	on	Full Name of Cor	mpany (Do not use a ticker symbol)	
			ude interests in sole proprietorships, es, limited liability partnerships, and	
☐ Yes	eed to question 4.			
Owner of Interest		Name of	Company or Business Entity	
C (1). For each company or busines names of <i>any other</i> companie interests valued at over \$10,0	s or business entities		Primary Company"), please list the y Company owns securities or equity	
Non-Publicly Owned Company or (the Primary Compar		Other Companies in which the Primary Company Owns Security or Equity Interests		
None or Not Known				
C (2). If you know that any entity list contracts with the State of No			rial business dealings or business briefly describe that business activity.	
Name of Company or Busine	ess Entity	Description of Business Activity with the State		
None or Not Known				
4. As of December 31, 2020, were you a value of \$10,000 or more that you			y the beneficiaries of a vested trust with	
Do not list assets held in blind trusts <a href="https://ethics.nc.gov">https://ethics.nc.gov</a>	s. <u>See 2021 SEI Hel</u> p	oful Tips for the defin	ition of "Vested Trust" and "Blind Trust."	
☐ Yes				
Name and Address of Trustee	Description	of the Trust	Your Relationship to the Trust	

5. As of December 31, 2020, did the mortgage on your prima personal loans and intra-fam	ary personal residence? Examp		
☐ Yes			
Name of D	ebtor	Type of Creditor (comme individua	•
honoraria, interest, dividend	( <b>not</b> specific amounts) of mor 20. Include salary, wages, stat s, rental income, business inco remember to disclose your i	e/local government retireme me, and other types required	ent income, professional fees, d to be reported on State and
Do <b>not</b> include income received	from the following sources:		
► Capital gains	► Federal government	retirement	
► Military retirement	► Social security incom	e/SSDI	
Recipient of Income	Name of Source	Type of Business/Industry	Type of Income
Adrian Phillips (Self)	George Sims	n/A	Other type of income

Professional and Civic Relatio	onships						
7(a). During 2020, were you or any members of your immediate family a director, officer, governing board member, employee, independent contractor, or registered lobbyist of a nonprofit corporation or organization operating in North Carolina primarily for religious, charitable, scientific, literary, public health and safety, or educational purposes?							
☐ Yes ☐ No - If "No," proceed to question 8.							
<ul><li>▶ Do not list State boards or entities.</li><li>▶ Do not list organizations of which you are a mere member.</li></ul>							
Name of Person	Position	Name of Non Corporation or Or		Nature or Purpose of Organization			
7(b). If the nonprofit corporations of State funds, briefly describe to							
Name of Nonprofit Corporation	or Organization	De	escribe State	e Business			
None or Not Known							
3. During 2020, were you or any members of your immediate family a director, officer, or governing board member of any society, organization, or advocacy group with an interest in matters over which your agency or board may have jurisdiction?							
$\square$ Yes $\square$ No $\square$ Legislator/Judicial Officer - You are not required to complete this question if you are filing because you are a legislator or judicial officer or you are filing as an appointee to one of those offices.							
► Do not list organizations of which	you are only a memb	er and do not serve i	n a leadership	role.			
Name of Person	Name of Society or Advoca	y, Organization, acy Group		adership Position , Officer, Board Member)			

9(a). List the name of each business with which you were associated where you or a member of your immediate family was an employee, director, officer, partner, proprietor, or member or manager as of December 31, 2020.							
Name of Person	Relationship to File	Name of Company	Role of Person				
No Business Associations							
	9(b). If you know that any entity listed in 9(a) above had any material business dealings or business contracts with the State of North Carolina or was regulated by the State as of December 31, 2020, briefly describe that activity.						
Name of Company	or Business Entity	Description of Busi	Description of Business Activity with the State				
None or Not Known							
10. Are you a practicing attor	ney?	·					
☐ Yes ☐ No ☒ Jud	licial Officer/State Attorn	еу					
If "Yes", check each category legal fees of more than \$10,0		n which you or the law firm with	which you are affiliated has earned				
$\square$ Administrative	☐ Admiralty	☐ Corporate	☐ Criminal				
☐ Decedent's Estates	☐ Environmental	☐ Insurance	☐ Labor				
$\square$ Local Government	☐ Real Property	☐ Securities	□ Тах				
☐ Tort litigation (including negligence)	☐ Utilities Regulat	tion $\square$ Other category no	$\square$ Other category not listed				
		(other than an attorney) or diciation for which you charged or	d you provide consulting services were paid over \$10,000?				
☐ Yes							
Type of Busi	ness	Nature of Serv	vices Rendered				

<ul> <li>12. Are you or your employer, or any members of your immediate family, or their employers currently: <ul> <li>licensed by the State board or agency with which you are or will be associated or</li> <li>regulated by the State board or agency with which you are or will be associated or</li> <li>in a business relationship with the State board or agency with which you are or will be associated?</li> <li>□ Yes ☒ No ☐ Legislator/Judicial Officer - You are not required to complete this question if you are filing because you are a legislator or a judicial officer or you are filing as an appointee to one of those offices.</li> </ul> </li> </ul>							
Name of Per	Name of Person  Name of Employer  (if applicable)  Type of Relationship  (Licensing, Regulatory, Business)						
13. Have you or a member of your immediate family been registered as a lobbyist or lobbyist principal within the 12 months preceding your filing of this form?  ☐ Yes ☑ No							
Name of Lobb	yist	Lobbyist's Prir	ncipal	Date of Registration	Registration Expiration		
Other Disclosures							
<ul> <li>receive any "gift(s)</li> <li>when both you an</li> <li>under circumstand</li> <li>To answer Yes, al</li> <li>Yes  No</li> </ul>	s)" exceeding sold those person ces that would		person or group Carolina, In to conclude th	of persons acting tog	gether,		
, , ,	•	ers of your extended fami	•	Evennted Dersons "			
Date Item Received		usly reported on the "Exp  Address of Donor(s)			stimated Market Value		

15. During 2020, after you were appointed, employed, or filed or were nominated as a candidate, did you  • accept a "scholarship" exceeding \$200 related to your public position from a person or group of persons acting						
together, • when those person(s) were outside North Carolina?						
A "scholars event, incl	ship" is a gruding tuition	, travel, lodging, meals, ar	r indirect, to attend a conference and other similar expenses.  to complete this question if you are a	-		
► Legislators are	ifts you have	previously reported on the "E	xpense Report for Exempted Persons a nonpartisan legislative organization			
Date of Scholarship	Name an	d Address of Donor(s)	Describe Event	Estimated Market Value		
16. Have you bee State member		or considered for appointmen	t to a covered board by the Governo	or or another Council of		
Council of State						
► Governo		► Lt. Governor	► Secretary of Sta			
► State A		► State Treasurer	·	of Public Instruction		
➤ Attorne ➤ Commis	ssioner of Insu	► Commissioner of Aurance	griculture	Labor		
⊠ Yes □	No					
			cumulative total of more than \$1 ontributions from immediate fami			
			6) and include "any advance, conveya e or subscription of money or anythin			
Date		Amount	Contributed t	to		
No Contributions						

17. Are you an appointee or prospe	ctive appointee as:			
a. the head of a principal state Governor; or	department (e.g., cabine	t secretary) appointed by the		
<ul> <li>b. a North Carolina Supreme Court Judge; or</li> </ul>	ourt Justice, Court of App	eals, Superior or District		
c. a member of any of the follo	wing boards:			
<ul> <li>ABC Commission</li> </ul>				
<ul> <li>Coastal Resources Comn</li> </ul>	nission			
<ul> <li>State Board of Education</li> </ul>	1		⊠ Yes	□ No
<ul> <li>State Board of Elections</li> </ul>				
<ul> <li>Division of Employment</li> </ul>	Security		76 331 77	
<ul> <li>Environmental Managem</li> </ul>	=		If "No," question 1	
Industrial Commission			question	10.
<ul> <li>Human Resources Comm</li> </ul>	nission			
<ul> <li>Rules Review Commissio</li> </ul>	n			
Board of Transportation				
<ul> <li>Utilities Commission</li> </ul>				
Wildlife Resources Comm	nission			
d. If so, were you appointed or	are you being considered	for appointment to that	N	
position by a Council of State		To appointment to that		⊔ No
,			If "No,"	
			question 1	L8.
Governor			I	
<ul> <li>e. If so, you must indicate whet activities with respect to or o the Council of State member</li> </ul>	n behalf of the candidate			
<ul> <li>i. Collected contributions for multiple contributions, a contributions to the cand</li> </ul>	nd transferred or delivere		☐ Yes	⊠ No
ii. Hosted a fundraiser at yo	our residence or place of	business?	☐ Yes	⊠ No
iii. Volunteered for campaig assistance, mailings, car the campaign of a candid	ivassing, surveying, or ar	ding phone banks, event ny other activity that advances	☐ Yes	⊠ No
18. Have you ever been convicted expungement?	of a felony for which yo	u have not received either: (i)	a pardon; c	or (ii) an order of
☐ Yes				
Offense	Date of Conviction	County of Conviction	State o	of Conviction
19. Are you aware of any other info concerning your compliance wit			ion in advisir	ng you
☐ Yes   ⊠ No   If yes, pleas	se provide that information	on below.		

#### **Affirmation**

The information provided in this Statement of Economic Interest and any attachments are true, complete, and accurate to the best of my knowledge and belief.

I have not transferred, and will not transfer, any asset, interest, or property for the purpose of concealing it from disclosure while retaining an equitable interest.

I understand that my Statement of Economic Interest and any attachments except for the Confidential Form regarding Unemancipated Children are public records.

I have read and understand the following statutes:

N.C.G.S. § 138A-26. Concealing or failing to disclose material information.

A filing person who knowingly conceals or knowingly fails to disclose information that is required to be disclosed on a statement of economic interest . . . shall be guilty of a Class 1 misdemeanor and subject to disciplinary action under G.S. 138A-45.

N.C.G.S. § 138A-27. Penalty for false information.

A filing person who provides false information on a statement of economic interest . . . knowing that the information is false is guilty of a Class H felony and shall be subject to disciplinary action under G.S. 138A-45.

I affirm under penalty of perjury that the foregoing is true and correct.

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